

NOTICE OF CANCELLATION
TO THE DEPARTMENT OF INDUSTRIAL RELATIONS
WORKERS' COMPENSATION DIVISION
649 MONROE STREET SUITE 3816
MONTGOMERY, AL 36131

STATE UNEMPLOYMENT COMPENSATION TAX NUMBER_____

FEDERAL ID NUMBER_____

CORPORATION/LLC_____

DOING BUSINESS AS_____

ADDRESS_____

ADDITIONAL LOCATIONS COVERED_____

NATURE OF BUSINESS_____NAICS_____

DATE OF CANCELLATION_____REASON_____

POLICY NUMBER_____

INSURANCE CARRIER_____

NCCI CODE_____